

# Training of Health Educators

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Never has health education been more important than it is today. Improved health of the general public, will be the result when each individual is sufficiently motivated to take the action necessary to retain or to acquire good health. Health education might be defined as the process whereby the individual or the group is moved to take this desirable action. Key persons in this process are the health educators. Before we consider the training of these educators, let us consider the work that they do.

## WORK OF THE HEALTH EDUCATOR

The administrator, with the assistance of the other staff members, is responsible for planning the services provided by his agency. The health educator assists with the educational activities to make these services as effective as possible. For example, the nurses may wish to have Mothers' or Fathers' classes for expectant parents; the sanitation personnel may develop food handlers' schools; the administrator and the other specialized professional personnel may wish to have staff conferences for in-service training. The health educator may assist in the organization of these activities and in the utilization of methods of conducting group discussions and conferences. He may also assist in the selection, preparation, and utilization of appropriate flip charts, exhibits, demonstrations, and films or other audio-visual aids that may be needed in these group work activities. The health educator may assist the administrator and the staff in the preparation of materials such as the house organ, special articles for publication in the county medical society bulletin, pamphlets, newspaper articles, and annual reports.

The health educator may assist the agency with its many types of planned orientation sessions for new staff members, and individual or group visitors such as members of the board of health, city or county governing officials, girl or boy scouts, classes from schools, or visitors from other agencies or foreign countries. He may be responsible for the educational techniques used in such

orientation programs.

The health educator works with many community groups either as a member of or as a consultant to the groups. These groups might include special committees such as citizen fact-finding committees, small neighborhood or over-all community councils, teachers or parent-teacher groups, and school health councils. He assists in the coordination of the educational activities of the health agencies in the community, and in the interpretation of health education to such other professional groups as medical or dental students. In connection with these group activities the health educator may write either news releases or radio scripts, or both, or work with others in the development of this publicity material; assistance may also be rendered to these groups in the techniques of developing group discussions or conferences.

Many of the more experienced health educators assist in the planning and development of field training experiences for health educators, health officers, nurses, nutritionists, sanitation personnel, and other public health workers.

The health educator works with all segments of the community. Therefore he should like people and enjoy working with all types of people. Some of his understanding of people is learned early in life as part of his growing up; he learns to recognize and appreciate the fundamental importance of individuals and groups in a democracy. All members of an organization perform an important function, and improved teamwork will develop where this is recognized.

Because some of the activities of a health educator have been indicated above, this does not mean that every health educator will participate in all of these activities in any one position, or in any one year of employment. In addition, as new health hazards become evident, public health activities will change, and the activities of the health educator must change to meet these new needs. An example of this might be the assignment of a health educator to work on civil defense activities.

## TRAINING HEALTH EDUCATORS

**Undergraduate Training.** Undergraduate college

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training is extremely important. It is essential that the candidate have a broad background in the biological and social sciences, in psychology, and in education. Let us now examine the reasons why these subjects are so important.

We study the biological sciences to learn how the human body is constructed and how it functions, as well as to learn the structure of other living things. We need to know how the various components of the human body and of other organisms function in order to understand the interactions of organisms that cause disease as we know it.

By the study of psychology we learn some of the reasons why we behave as we do: Why does one physically well child appear shy and another very forward? What happens when we are angry, sad or happy, or feel rejected, or feel wanted? How and when are people motivated? The health educator applies all of this knowledge in his work with individuals and with groups.

Through the study of the social sciences we learn how our social patterns develop—community customs, superstitions, how government came into being, how monogamy and the family pattern developed. The health educator with some background in social science will look for natural boundaries in a community, i. e., what groups normally work together, and why persons from certain other areas, because of community customs, may have difficulty working together.

In the courses in education, the health educator studies how our educational system has developed, and learns methods and philosophy of teaching, as well as methods of determining what has been learned by the group or the individual.

**The Apprenticeship Period.** The apprenticeship period is planned so that the individual may learn what public health is and what public health personnel do. It is a period of trial when he is determining whether or not he has the aptitude and qualifications for a career in public health and health education, and whether he wishes to continue training for such a career. This period also provides a time for the supervisors to observe him in action and to evaluate his qualifications for the position of health educator.

This apprenticeship period is helpful as a refined screening device which will prevent a long expensive training period being wasted on individuals who find that they are not really interested in or qualified to continue in this profession. During this period the apprentice observes the many activities of the organization. He may work

as a receptionist, or as a record clerk in a clinic, where he can observe methods of filing materials and of previewing films, as well as other activities of the clinics including the work of the nurses, the sanitarians, and other personnel in the agency. If the individual shows interest and promise he continues through the apprenticeship period; if not, he discontinues the training.

When he completes the apprenticeship he is then ready to begin his academic training in a school of public health, and because of the apprentice training the following academic training will be much more meaningful to him.

**Training in the Graduate School of Public Health.** During this period of training, the individual learns the theory and the science of the public health field through the study of public health administration, epidemiology, statistics, nutrition, parasitology, sanitation, mental health, and the other subjects presented in this enriched curriculum. He also is learning the many educational techniques that are helpful and the importance of careful planning and evaluation.

**Graduate Field Experience.** The health educator now has an opportunity to put into practice the many educational skills and techniques learned through all of his previous training. He still has the guidance of the health educator supervisor where he is assigned, but he delves deep into problems and is responsible for a high quality of performance. He gains confidence in his professional activities. At the end of this experience, he is prepared for a position where he will work independently and assume greater responsibility.

**In-service Training.** When the professionally trained health educator accepts a position, he anticipates guidance from his administrator as well as assistance from other health educators who have more experience. In-service training is made possible through staff conferences within the organization, and through consultation services available from State or federal agencies. This may mean moral support as well as technical guidance, and the result will mean professional growth on the job.

As new public health hazards appear the health educator will need additional training to meet these new activities. This may be achieved through attendance at national meetings, or it may mean participation in special conferences or institutes.

In-service training should be a continuous process throughout the professional career of



the public health educator.

#### SUMMARY

The training of a public health educator might be likened to building a home, where the undergraduate training becomes the foundation for the entire structure; the apprenticeship and graduate training might be the building of the first and second story of the home; the graduate field

training compares with the building of the roof and other finishing touches; and the in-service and advanced training might be compared to addition of new features and the repairs on the structure which are needed from time to time.

In the building of a home, these many features are essential, and likewise a fully qualified health educator can profit most where all these types of training are made possible.

## Are You a Good Supervisor?

George B. Tremmel, Sr. Sanitarian (R)\*

Do you know if you are a good supervisor? Many of us are good supervisors in all respects, but do we know why? What makes a good supervisor? Broadly summarized, it is the practice of the Golden Rule, "Do unto others as you would have others do unto you." Another way of saying it would be that good supervisors constantly apply the principles of human relations in their dealings with employees.

It is difficult for one to evaluate his supervisory ability from the above broad statements. To be a good supervisor, one must first understand the principles of good supervision and then strive to practice these principles. To do this, some device is needed by which the supervisor can test his understanding of the principles of good supervision and analyze and rate their application to his performance. In daily dealings with his fellow employees, a good supervisor must thoughtfully apply the primary rule of human relations as set forth in the Golden Rule. Skill in any art comes from thoughtful practice. The following are

suggested as the Ten Commandments of a good supervisor:

1. Be democratic—smile and be cheerful.
2. Give sincere appreciation for a job well done.
3. Do not criticize or condemn employees; instead offer constructive suggestions.
4. Be interested in your employees—make them feel important.
5. Encourage personnel initiative by asking questions instead of giving orders.
6. Correct mistakes as tactfully as possible; be firm with the employee, but never hurt his feelings.
7. Give employees an opportunity to demonstrate their abilities.
8. Encourage employees to submit suggestions or ideas. Listen to them.
9. Keep employees informed about their work—stimulate their interest.
10. Call your employee by name. It sounds good to him.

Daily application of those rules and their use as a yardstick for periodic self-analysis and appraisal are recommended for those who earnestly desire to be good supervisors.

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